2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Jan 23, 2006 08:00 AN Secretary of State

DOCUMENT # P98000071024 1. Entity Name PROTECTGARD CORP.		Secretary of State
Principal Place of Business 6468 NW 77TH COURT 8030NW 6777 MIAMI, FL 33166 Mailing Address C/O JERRY M. B 2079 WANTAGH, NY	H AVE.	
DO NOT WRITE IN THIS	S SPACE	01092006 No Chg-P CR2E034 (11/05) 4. FEI Number
6. Name and Address of Current Registered Agent KOHLI, VIVEK 8030 NW 67TH MIAMI, FL 33166	\$	DO NOT WRITE IN THIS SPACE
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when remistating) DATE		
		5.00 May Be ded to Fees
TITLE NAME NAME NAME NOHLI, VIVEK STREET ADDRESS CITY-ST-ZIP NAME SOOD, RAJESH STREET ADDRESS CITY-ST-ZIP NIAMI, FL 33178 TITLE NAME STREET ADDRESS CITY-ST-ZIP	qualify for the exemptions contains	UCDOCO333838 01/25/06-80040-005 150.00 DO NOT WRITE IN THIS SPACE
12. I hereby certify that the information supplied with this filing does not indicated on this report or supplemental report is true and accurate e of the corporation or the receiver or trustee empowered to execute the changed, or on an attachment with all oddress, with all other like empower.	quality for the exemptions contains and that my signature shall have the sis report as required by Chapter 6 powered	ed in Chapter 119, Florida Statutes. I further certify that the information e same legal effect as if made under oath, that I am an officer or director 07, Florida Statutes, and that my name appears in Block 10 or Block 11 if